



# Third Ventricle's Colloid Cysts Removal by the Endoscope



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**Received:** December 12, 2019; **Published:** January 07, 2020

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**Keywords:** Third ventricle; Colloid cyst; Surgical approach.

## Short Communication

Third ventricle's colloid cysts are usually arising from the third ventricle's roof. Occlusion of the Monro's foramen, hydrocephalus, headache, disturbances in the memory functions and sudden death can be caused by such non-neoplastic masses. Colloid cysts removal by the endoscope, stereotactic drainage, ventricles shunting, transcallosal and transcortical craniotomy can be used as the treatment options for such cysts. Usually removing the cysts by the endoscope is recommended because of the higher morbidity rates of the microsurgical removal and the recurrence or even failure to treat risks of using stereotactic drainage method [1-3].

The surgical approach for the colloid cysts is performing through one burr hole. It would be located behind the nasion at a distance about eight centimetres and at the most lateral position. It is important to do not transit the caudate head during surgical approach, which in most of the cases is located at a distance about four to six centimetres from the midline. Initial entrance to the ventricle is better to be done by the image guidance. It is important to take enough care to not causing trauma or damage to the fornix while coagulating the choroid plexus [4,5].

By opening the cyst's face, its content would be suctioned or be removed with the forceps. Then the cyst's wall would be dissected until it can be free from the ventricle's roof. Since the

colloid cysts which their sizes are more than two centimetres have this tendency to be much more adhered to the fornix and in case of selecting such surgical approaches to remove the cysts, the fornix would be stretched and can be easily broken apart, it is better for such larger cysts to be removed by using microsurgical approaches [6].

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DOI: [10.19080/OAJS.2020.11.555809](https://doi.org/10.19080/OAJS.2020.11.555809)

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